



**ARIZONA DEPARTMENT OF ECONOMIC SECURITY
DIVISION OF AGING AND ADULT SERVICES**

Janet Napolitano
Governor

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Tracy L. Wareing
Director

Date: May 30, 2008

To: Area Agencies on Aging
Pima Health Systems

From: Rex Critchfield
Assistant Director

Subject: **Area Agencies on Aging Allocations for SFY 2009**

Attached are the allocations for the Senior Community Services Employment Program and Foster Grandparent Program for State Fiscal Year 2009.

The Alert is subject to change as additional information is received by the Division pertaining to the funding sources identified.

The following Alert is attached:

<u>ALERT</u>	<u>FUND SOURCE/TYPE</u>
ALERT SFY-09-11B	Other Funds – Senior Community Service Employment Program (SCSEP) Revised Allocations
ALERT SFY-09-11C	Other Funds – Foster Grandparent Program (FGP)

A revised SFY 2009 contract operating budget is due to the Division of Aging and Adult Services, Contracts Management Unit on or before close of business Monday, June 16, 2008. An amendment will be prepared.

Alerts are now available on the Division website using the link:
<http://www.azdes.gov/aaa/publications/default.asp>. Scroll down to Alerts at the bottom of the webpage and select the respective Alert.

Should you have any questions regarding the attached Alert, please contact your respective Contract Specialist.

c: Veronica Holden, Bridget Casey, Lynn Larson, Joel Millman, Jerry Lay, Scott Mitchell, Ada Leach, Mary Weston, Melanie Starns, Darrell Funk, Shannon Kavanagh, DAAS file

ARIZONA DEPARTMENT OF ECONOMIC SECURITY
Division of Aging and Adult Services
ALERT

SFY-09-11B

**Other Funds
for SFY-2009**

This alert applies to Area Agency on Aging, Region One Inc., Pima Council on Aging, Northern Arizona Council of Governments, Pinal-Gila Council for Senior Citizens, and Mohave County Career Center One-Stop for the Senior Community Services Employment Program (SCSEP) for SFY 2009.

This Alert is being provided to non-participating regions as information only.

Alert SFY-09-11 dated February 29, 2008 allocated planning levels for the SCSEP. Attachment A provides the **revised** allocations that identify the contract levels for your respective Planning and Service Area for SFY 2009. Please refer to Alert SFY-09-11 for program specifications. Amendments to the SCSEP allocation are to be made to the SCSEP contract.

The U.S. Department of Labor modified the funding formula in preparation for the July 2008 increase in the federal minimum wage. As a result, for SFY 2009, the net funding level for the state SCSEP increased by \$118,423. In addition, a net decrease of five (5) training positions statewide (161 to 156) was realized. Training slots were reallocated in the counties where a condition of over service existed.

SCSEP does not allow for payment of accumulated sick or annual leave for program participants. SCSEP participant training is conducted an average of 20 hours per week. Funding is allocated to sub grantees for the following categories: Enrollee Wages and Fringe Benefits (EWF); Other Participant Costs (OPC) for supportive service and training activities, and; Administration. Per Title V of the OAA, not less than 75% of a grant award can be used for EWF. Administrative costs cannot exceed 13.5% of a grant.

Program participants are paid the higher of state or federal minimum wage except for those selected by each sub-grantee as Program Representatives. **Sub-grantees are to take note that on January 1, 2009 the state minimum wage is set to increase and will have a direct impact on available funding in the category of Enrollee Wages.** Sub-grantees will be notified of the new minimum wage when it is determined.

It is recognized that SCSEP is not a fully funded program. Increases in minimum wage and the realization that not all slots are filled 100% of the time throughout the program year impact funds. Although it is the goal of each sub-grantee to fill all training slots, the number of filled slots may vary throughout the program year. Based on historical sub-grantee expenditures, an attrition rate of approximately 20% is factored into funding levels. Regular monitoring requires collaboration between the programmatic and fiscal efforts of each sub-grantee to maintain the balance between filling slots and the funds to support them. DAAS relies on each sub-grantee to expend funds without over- or under-expending its contracted levels.

SCSEP funds do not carryover from one program year to another. Unexpended funds must be returned to USDOL/ETA. Monitoring of enrollments and funding is crucial.

Performance measures and associated goals have not been determined at the time of this Alert and will be provided in a future Alert when they are available.

Should you have any questions regarding the allocation, please contact your Contract Specialist.

REVISED DISTRIBUTION OF SENIOR COMMUNITY SERVICE EMPLOYMENT PROGRAM
TRAINING POSITIONS AND FUNDING FOR SFY09 (July 1, 2008 - June 30, 2009)

FY 09 SCSEP	County	# PARTICIPANTS	Totals
REGION 1	Maricopa	84	84
REGION 2	Pima	20	20
REGION 3	Apache	4	24
	Coconino	2	
	Navajo	3	
	Yavapai	15	
MOHAVE COUNTY	Mohave	15	15
REGION 5	Gila	6	13
	Pinal	7	
		156	156

	% OF STATE	CONTRACTED WAGES/FRINGE	SUPPORTIVE SERVICES	ADMINISTRATION	CONTRACT SUB-TOTAL	10% REQUIRED IN-KIND	CONTRACT TOTAL
REGION 1	54%	\$ 591,249.00	\$ 30,474.00	\$ 73,905.00	\$ 695,628.00	\$ 77,292.00	\$ 772,920.00
REGION 2	13%	\$ 140,773.00	\$ 7,256.00	\$ 17,597.00	\$ 165,626.00	\$ 18,403.00	\$ 184,029.00
REGION 3	15%	\$ 168,928.00	\$ 8,707.00	\$ 21,116.00	\$ 198,751.00	\$ 22,083.00	\$ 220,834.00
MOHAVE COUNTY	10%	\$ 105,580.00	\$ 5,442.00	\$ 13,198.00	\$ 124,220.00	\$ 13,802.00	\$ 138,022.00
REGION 5	8%	\$ 91,502.00	\$ 4,716.00	\$ 11,438.00	\$ 107,656.00	\$ 11,962.00	\$ 119,618.00
	100%	\$ 1,098,032.00	\$ 56,595.00	\$ 137,254.00	\$ 1,291,881.00	\$ 143,542.00	\$ 1,435,423.00

ARIZONA DEPARTMENT OF ECONOMIC SECURITY
Division of Aging and Adult Services
ALERT

SFY-09-11C

**Other Funds
for SFY-2009**

This alert applies to Pima Council on Aging (PCOA) and the Western Arizona Council of Governments (WACOG) who will be providing volunteer services under the ADES Southwest Foster Grandparent Program (FGP) for SFY 2009 in Pima, La Paz, and Yuma Counties. This is one-time funding intended to develop an ADES Southwest FGP presence in Pima County, La Paz, and Yuma Counties. Continuation of funding is dependent on available federal funds and the success in achieving the Volunteer Service Hours identified in Appendix A.

The alert is being provided to non-participating regions as information only.

The Division of Aging and Adult Services (DAAS) received a grant award from the Corporation for National and Community Service to administer the ADES Southwest FGP. The grant period is April 1, 2008 to March 31, 2009. The mission of the ADES Southwest FGP is to create lasting positive changes in the lives of children in need by fostering intergenerational relationships within communities, and to engage seniors 60 years or older with limited income in volunteer service to meet critical community needs. The ADES Southwest FGP has provided services for over 25 years and is responsible for serving Pinal, Maricopa, Pima, Yuma, Greenlee, Cochise, La Paz, Gila, Graham and Santa Cruz counties. PCOA will serve as the lead organization for the development of volunteer services for the ADES Southwest FGP in Pima County. WACOG will serve as the lead organization for the development of volunteer services for the ADES Southwest FGP in La Paz and Yuma Counties.

The ADES Southwest FGP serves seniors 60 years of age and older who meet income guidelines who are physically and mentally active and have the desire and ability to provide services to children with exceptional or special needs. Seniors must pass an interview and background check. As FGP volunteers, seniors provide tutoring and/or mentoring to students, pre-school through 12th grade.

The contract will be amended for the following amount:

Region 2	30,000
Region 4	<u>18,333</u>
Total Allocation	\$ 48,333

The following service code will be used for this contract period:

FGA = Foster Grandparent Program Administration

The scope of work is attached. Several forms and related documents are provided in Appendix B. Originals of FGP volunteer timesheets must be submitted to the Division of Aging and Adult Services (DAAS) to the attention of the FGP Director. Payments to FGP volunteers will be provided through the DAAS. Client specific information will not be entered into AIMS.

Should you have any questions regarding the allocation, please contact your respective Contract Specialist.

SCOPE OF WORK

Volunteer Services - Foster Grandparent Program (FGP)

7.40 ADES VISION AND MISSION STATEMENTS

- 7.40.1 **ADES Vision:** Every child, adult, and family in the State of Arizona will be safe and economically secure.
- 7.40.2 **ADES Mission:** The Arizona Department of Economic Security (ADES) promotes the safety, well being, and self sufficiency of children, adults, and families.
- 7.40.3 **Foster Grandparent Program Mission:** To create lasting positive changes in the lives of children in need by fostering intergenerational relationship within communities, and to engage seniors 60 years or older with limited income in volunteers service to meet critical community needs.

7.40.4 PURPOSE

- 7.40.4.1 Purpose Statement – Establish the ADES FGP in Pima, La Paz, and Yuma Counties through active volunteer recruitment, placement, training and development of volunteer stations.
- 7.40.4.2 Legal Authority – Legal Authorities include:
- 7.40.4.3 A.R.S. §41-1954.A.6: provides the Department the authority to contract and incur obligations within the general scope of its activities and operations.
- 7.40.4.4 Title 45: Public Welfare, Part 2552 - Foster Grandparent Program, 2552.11 - 2552.122.
- 7.40.4.5 Corporation for National and Community Service, Discretionary Grant Funds: funding available to Pima County totals \$30,000 and available to La Paz and Yuma Counties totals \$18,333.

7.40.5 SERVICE DESCRIPTION

- 7.40.5.1 Taxonomy Definition - A service that provides coordination of volunteer activities.
- 7.40.5.2 Actual Service Definition – this service provides 1) recruitment, placement and training of FGP volunteers; and development of volunteer stations to meet station/volunteer needs.
- 7.40.5.3 Service Eligibility/Targeted Population - To be eligible for the program seniors must be 60 years and older, meet income guidelines, be physically and mentally active, pass an interview and background check, and have the desire and ability to provide services to children with exceptional or special needs.
- 7.40.5.4 Background - The FGP is sponsored by the ADES, Division of Aging and Adult Services (DAAS). The ADES Southwest FGP has provided services for over 25 years, the FGP links with other state programs and services strengthening the overall quality of program delivery. The ADES FGP serves Pinal, Maricopa, Pima, Yuma, Greenlee, Cochise, La Paz, Gila, Graham and Santa Cruz counties. FGP volunteers provide tutoring to students, grades pre-school through 12th grade, consisting of daily one-on-one reading instruction utilizing a variety of resources to include books, games, phonics cards, and other skill-related activities to reinforce basic concepts and skills. In conjunction with reading instruction, consistent and structured tutoring by seniors can help students improve their skills and reading levels, as well as their motivation and behavior in both reading and regular classrooms. Mentoring is one of the most significant ways Foster Grandparents impact the life of a young person. As such Foster Grandparent provides emotional support and guidance to at-risk or troubled youth (up to age 18).

7.40.6 CONTRACT REQUIREMENTS

- 7.40.6.1 Culturally Relevant and Linguistically Appropriate – The Contractor shall ensure that all services provided are culturally relevant and linguistically appropriate to the population served.
- 7.40.6.2 The Contractor shall list in the AZ 2-1-1 statewide information and referral database, the health and human services or emergency resource services provided by the Contractor that meet the inclusion policy for Arizona 2-1-1. The Contractor shall keep this information current during the term of this contract. The Inclusion Policy and information about how to register is located online at <http://www.az211.gov> under the link "Provider Tools".
- 7.40.6.3 The Contractor shall comply with the following Volunteer Coordinator requirements:
- 7.40.6.4 Designate and ensure a Volunteer Coordinator will perform the functions identified in the service requirement section.
- 7.40.6.5 Will ensure that the Volunteer Coordinator shall possess:
- a). Bachelor's Degree in social sciences, education or other related subject plus one year of experience working with volunteer management;
 - b). Three years of experience may be substituted for education; one (1) year of experience

- equals one (1) year of education;
- c). A valid AZ driver's license; and,
- d). Must be able to provide their own transportation.

7.40.6.6 The Contractor shall ensure the Volunteer Coordinator shall comply with the following service deliverables:

- 7.40.6.7 Recruit eligible volunteers for the FGP as detailed in Appendix A.
- a). Screen potential volunteers for the FGP ensuring they meet the age and financial program requirements as identified on the FGP Fact Sheet.
 - b). Determine eligibility and complete appropriate forms in the volunteer packet (Appendix B) including the FGP Application and Enrollment Form, FGP Reference Information, FGP Driver's License/Vehicle Insurance Certification, FGP Annual Income Verification, Physical Examination, and FGP Service Description. Other forms may be requested by the FGP.
 - c). Complete mandatory background check and fingerprint clearance requirements as specified in A.R.S. §46-141.
 - d). Submit the completed FGP volunteer packet as identified above per the directions in section 7.40.6.4.1.
 - e). Coordinate and provide 40-hour orientation for new volunteers. This may be conducted in collaboration with the volunteer station.
 - f). Coordinate and provide on a monthly basis for an annual total of twelve (12), four-hour in-service training for all volunteers. This may be conducted in collaboration with the volunteer station.
 - g). Place FGP volunteers with appropriate volunteer stations.
 - h). Develop and establish eligible volunteer stations for the placement of FGP volunteers.
 - i). Ensure Memorandums of Understanding with volunteer stations are signed and renewed every two years.
 - j). Perform monthly site visits, for a minimum annual total of twelve (12), to ensure appropriate service activities of volunteers. Site visits may be performed more frequently as needed.
 - k). Develop strategic partnerships and collaborations that support the activities of FGP volunteers.
 - l). Maintain frequent dialogue with the ADES Foster Grandparent Program Director on an as needed basis to ensure requirements are being met.
 - m). Comply with Federal and State guidelines adhering to program regulations.
 - n). Maintain copies of volunteer files including the volunteer packet, updates, and assessments as appropriate.
 - o). Ensure timely submission of programmatic reports for the program.
 - p). Ensure bi-weekly submission of timesheets by the volunteer stations. Timesheets are to be faxed bi-weekly to the FGP Payroll at 602-542-6575 and originals mailed to the FGP Coordinator at the address identified in section 7.40.8.2.

7.40.7 REPORTING UNITS

One unit of service equals one hour of staff time.

7.40.8 REPORTING REQUIREMENTS

7.40.8.1 Financial/Programmatic

The contractor shall submit the following reports:

- a) Upon completion of the volunteer packet the originals shall be submitted.
- b) Monthly Service Report that includes at a minimum: activities transpiring during the month (to include actual task completion dates), updates, other assessments, etc.
- c) A Semi-Annual Report that includes at a minimum a quantitative (statistics) and narrative description of the activities that occurred during the reporting period, and client participation reports, results of client surveys, and a description of how client volunteers were utilized.
- d) An Annual Report that includes at a minimum a quantitative (statistics) and narrative description of the activities that occurred during the reporting period, and client participation reports, results of client surveys, and a description of how client volunteers were utilized.
- e) Other reports as requested by the FGP.
- f) The Contractor shall submit the reports to:

Arizona Department of Economic Security
 DAAS Contract Management Unit
 P. O. Box 6123 – Site Code 950A
 Phoenix, AZ 85005

7.40.8.2 Financial

The Contractor shall provide financial reporting through the information management system identified by the Divisions of Aging and Adult Services.

- a) The Contractor shall ensure originals of FGP volunteer timesheets are submitted to:

Arizona Department of Economic Security
 DAAS FGP Coordinator
 P. O. Box 6123 – Site Code 950A
 Phoenix, AZ 85005

7.40.9 MATCH REQUIREMENT

The Contractor shall provide a 10% match as non-federal cash and or non-federal in-kind.

- 7.40.9.1 Non-federal cash; costs borne by the applicant and cash contributions of any and all third parties involved in the project, including sub-grantee, contractors and consultants.
- 7.40.9.2. Non-federal non-cash (in-kind) include but are not limited to; supervisory time from non-federal, non-cash funding and use of facilities to hold meeting or conduct project activities.
- 7.40.9.3 The formula for calculating the required match is:

$$\frac{\text{Federal Funds requested (i.e., \$46,500)} \times \text{Applicant Match Rate (i.e., 10\%)}}{\text{Federal Match Rate (i.e., 90\%)}} = \text{Required Project Match}$$

7.40.10 MATERIALS/SERVICES PROVIDED BY DES

The Department shall:

- 7.40.10.1 Provide technical assistance as determined to be necessary by the Program Director or Volunteer Coordinator and/or as requested by the Contractor.
- 7.40.10.2 Provide FGP Operations Handbook to Volunteer Station.
- 7.40.10.3 Provide a calendar for when FGP volunteer timesheets are to be submitted.

Appendix A

County	Recruitment Goal # of Volunteer Hours	Recruitment Goal # of Volunteer*
Pima	18,792	18
La Paz and Yuma	11,484	11

*The number of volunteers are based on an average of 20 hours a week totaling 1,044 a year. The number of volunteers to be recruited will vary based on the number of hours a volunteer provides services. The number of hours a volunteer may provide services is between 20 to 40 hours.



Arizona Department of Economic Security (ADES) FOSTER GRANDPARENT PROGRAM

Service Description

PURPOSE:

To connect the generations. To provide volunteer service that addresses community needs. To create meaningful relationships with special needs children by providing encouragement, guidance, and companionship on a one-on-one basis. To provide extra care and attention to special needs children/youth in order to improve their physical, mental, emotional and social development so they may grow to reach their maximum potential and become as independent as possible. To serve children in school, day care, Head Start and/or institutional settings.

QUALIFICATIONS:

Age 60 years or older. A County resident. Annual income falls within Federally established guidelines. Willing and able to volunteer with children an average of 20 hours per week. Physically and mentally capable of performing duties pertaining to the Foster Grandparent Program concept of providing attention and guidance to children/youth or adults with exceptional needs.

PERFORMANCE RESPONSIBILITY AND TASK ACTIVITIES:

Listen, talk, sing, walk, read, tutor, and model appropriate behaviors and skills, encourage socialization, assist with self-help skills (washing hands, eating). Participate in-group activities play games, story telling. Assist with reading and other academic subjects. Teach social skills. Assist with learning activities and developmental therapy. Reinforce lessons taught by teachers. Help child to follow directions and accomplish work. Act as a calming agent. Help child stay focused on task. Clarify/translate group instructions into individual instructions. Encourage and praise child. Assist in the development of motor and learning skills, help to prevent/delay/lessen the effects of institutionalization. Provide intergenerational exposure. Work on craft/art projects, or accompanying children on field trips.

RESTRICTIONS:

- Do not serve as paid staff, custodian, babysitter, supervisor, substitute teacher or disciplinarian.
- Refrain from using corporal punishment, or physically or verbally abusing children.
- Refrain from giving gifts, food, or money to children.
- Not to be left alone with children at any time or in charge without supervision by site staff.
- Refrain from bringing guests to the volunteer site unless written permission is obtained from the site and provided to the FGP office in advance of the visit.
- Refrain from taking children from the site unless accompanying them on field trips supervised by site staff.

- Refrain from correcting papers, making photocopies, preparing meals and cleaning up unless children participate in these activities.
- Refrain from discussing personal religious beliefs, preaching, singing religious songs or praying out loud.
- Refrain from participating in religious education classes, prayer services, mass or religious retreats.

BENEFITS:

Hourly Stipend \$2.65 per hour. Travel reimbursement, Insurance, Free physical examinations pre-enrollment and annual), Paid time off (annual leave), Socialization, Recognition, Training (orientation and monthly in-service training).

☺ **The stipend is non-taxable, non-reportable income that does not affect eligibility for other programs and services.**

TERMS OF ENROLLMENT: As per Foster Grandparent Program.

REPORTS TO:

LOCATION:

I have read and agree to follow this service description.

Signature

Date



ADES FOSTER GRANDPARENT PROGRAM Application & Enrollment Form

Date of Application:			
Name of Volunteer (first and last):		Maiden Name or other Alias:	
Mailing Address (street, apt#, city, state, zip code):			
Telephone:		Message Number:	
Social Security Number:	Male/Female:	Date of Birth	
Please circle whether you drive and can provide your own transportation:			Yes or No
Driver's License Number:		Expiration Date:	
Languages spoken other than English:			
Other experience relating to FGP and why you would like to become an FGP volunteer:			
<hr/> <hr/>			
Please circle your volunteer preference time:			
Morning Afternoon No Preference			

Please list two character references that are **Not** related to you.

Name: _____	Name: _____
Address: _____	Address: _____
City/State/Zip: _____	City/State/Zip: _____
Phone #: _____	Phone #: _____

EMERGENCY CONTACT INFORMATION

Name of Contact Person:	Phone Number
Address:	Relationship to you:

INSURANCE BENEFICIARY

You **MUST** name a beneficiary for **OUR** insurance carrier in case of accidental death or dismemberment while volunteering.

Name:	Phone Number:
Address:	City/State/Zip:
Previous Occupation:	Hobbies and/or General Interests:

Please let us know if you have a need(s) for any special accommodations in order to be placed as a Foster Grandparent volunteer:

VOLUNTEER STATION:	ENROLLMENT DATE:
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ADES FOSTER GRANDPARENT PROGRAM VOLUNTEER AGREEMENT AND RELEASE STATEMENT

I, the undersigned, hereby state that if accepted as a Foster Grandparent volunteer, I agree to the following:

- 1) Abide by program policies and procedures and that of its program partners (also referred to as volunteer stations);
- 2) Commit to serve a minimum of 20 hours per week and up to a maximum of 40 hours per week (not to exceed 2088 hours in a year) over the course of a year;
- 3) Attend required pre-service orientation and training (PSOT), on-site orientation and training (OSOT), and in-service trainings (IST);
- 4) Communicate regularly with program and station staff;
- 5) Participate regularly in program related activities and functions; and
- 6) Give permission to contact references and conduct a fingerprinting/background check as part of the screening process for entrance into the program;

I have not been convicted of any felony, crime or misdemeanor (other than a minor traffic violation), nor am I currently under indictment. Furthermore, I fully release, discharge and hold harmless the Arizona DES Foster Grandparents Program and its program partners, including their employees, of any and all liability, claims, causes of action, cost, and expenses, which may at any time hereinafter become attributable to my participation in the program.

Furthermore, I fully understand that, if accepted into the Foster Grandparent Program, I am a volunteer in the program and not an employee of the State of Arizona. Also, as a volunteer, I realize that I receive a tax-free stipend and not a taxable wage for my volunteer efforts. If I drive, I certify that I am covered and will maintain the Arizona State minimum automobile liability insurance.

I hereby certify that under penalty of perjury that the answers given above are true and correct to the best of my knowledge and belief and I agree to have a background check completed is required.

Signature of Applicant:

Date of Application:

Please submit application to:

ADES Foster Grandparent Program
1789 W. Jefferson 950A
Phoenix, AZ 85007
Phone #: 602-542-4446
Fax #: 602-542-6575

ARIZONA DEPARTMENT OF ECONOMIC SECURITY
Aging & Adult Administration
FOSTER GRANDPARENT PROGRAM
Annual Income Verification

CONFIDENTIAL

CONFIDENTIAL

The foster grandparent program is required by the corporation for national service to complete an annual income verification on foster grandparents. Information obtained in this review is strictly confidential.

Please fill out and attach a copy of your Social Security letter or check. If you do not receive Social Security please attach a letter of explanation.

Please note: the stipend you receive from the foster grandparent program is not considered as income for any federal, state or local purpose.

Foster Grandparent: _____ Social Security Number: _____

Address: _____ City: _____ Zip Code: _____

Phone: () _____ Number of people in your household: _____ (include yourself)

	APPLICANT	SPOUSE/OTHERS	TOTAL
SOCIAL SECURITY BENEFITS	\$ _____	\$ _____	\$ _____
SUPPLEMENTAL SECURITY INCOME	\$ _____	\$ _____	\$ _____
INCOME FROM ANNUITIES	\$ _____	\$ _____	\$ _____
INCOME FROM PENSIONS	\$ _____	\$ _____	\$ _____
RENTAL INCOME	\$ _____	\$ _____	\$ _____
INTEREST RECEIVED	\$ _____	\$ _____	\$ _____
OTHER INCOME	\$ _____	\$ _____	\$ _____
Total:	\$ _____	\$ _____	\$ _____

TOTAL MONTHLY INCOME: \$ _____ TOTAL ANNUAL INCOME: \$ _____

I certify that the information furnished above is correct and that I understand that any false information may result in my dismissal from the Foster Grandparent Program whether the applicant is eligible or not.

Signature of Foster Grandparent _____ Date _____

Signature of Volunteer Station Supervisor _____ Date _____

Verification Attached _____ Approved _____ Exceeds Eligibility _____ Not Approved _____

Signature of FGP Project Director _____ Date _____



Arizona Department of Economic Security (ADES) FOSTER GRANDPARENT PROGRAM

Transportation Documentation

Foster Grandparent Name : _____ Date : _____

1. I certify that I drive _____ miles round trip daily to the volunteer station. I am requesting _____ cents per mile and/or a reimbursement of \$_____ per day for travel expense. (NOTE: Maximum reimbursement is based on available funds.)
- 2) I utilize public transportation or an alternate source of transportation round trip to the volunteer station. I am requesting a reimbursement of \$ _____ per day for actual travel expense.

PLEASE NOTE: Foster Grandparents can utilize their personal vehicle rather than public transportation, but will be reimbursed the lesser daily amount based on available funds. Foster Grandparents utilizing their personal vehicle must maintain an up-to-date driver's license and vehicle insurance coverage.

☺ FOSTER GRANDPARENTS ARE TO CONTACT THEIR SUPERVISOR IF THERE ARE CHANGES IN THE ABOVE REIMBURSEMENT RATE REQUESTS.

Signature of Foster Grandparent: _____ Date: _____

Signature of FGP Project Director: _____ Date: _____

COMMENT: Reimbursement rates are subject to change (lower or higher) depending on budget expenditures and availability of funds.



**Arizona Department of Economic Security (ADES)
FOSTER GRANDPARENT PROGRAM**

**Driver License/Vehicle Insurance
CERTIFICATION**

I certify that I have a valid and current driver's license, and that I maintain liability insurance (or other designation proof of financial responsibility) including at least \$15,000/30,000 for bodily injury or death and \$10,000 for property damage in any one accident.

I certify that I will continue to maintain a valid and current driver's license and liability insurance on my personal vehicle as long as I use it for transportation (round trip) to my volunteer station.

Signature of Foster Grandparent

Date

Signature of Volunteer Station

Date

Signature of FGP Coordinator

Date

Return Original Form and Bill To:
 Project Director
 Foster Grandparent Program
 1789 W. Jefferson St. 950A
 Phoenix, AZ 85007
 Phone: (602) 542-4446
 Fax: (602) 542-6575



Please Note:
 Foster Grandparents are required to have a skin test (unless) he/she had a previous reaction to a skin test. If patient is unable to have a skin test, the Foster Grandparent Program will assume the cost of an x-ray.

Name: _____ Date of Examination: _____

Address: _____ City: _____ State: _____ Zip: _____

Birthday: _____ Volunteer Station: _____

MEDICAL HISTORY:

Head or Spinal Injury (severe)	YES / NO	Diabetes	YES / NO
Convulsions (seizures/epilepsy)	YES / NO	Stomach Ulcer	YES / NO
Encephalitis	YES / NO	Rheumatic Fever	YES / NO
Heart Disease	YES / NO	Asthma	YES / NO
Syphilis/Gonorrhea	YES / NO	Kidney Disease	YES / NO

PHYSICAL EXAM:

Pulse:	Vision:	Blood Pressure:
Reflexes: ___ good ___ fair ___ poor	Hearing: ___ good ___ fair ___ poor	TB skin test/x-ray: ___ Negative ___ Positive

Medications: _____

Physician's
 Comments/Recommendations: _____

Physician's Certification: I certify that I have examined the above patient and find this patient
 _____ CLEARED / _____ NOT CLEARED for service as a Foster Grandparent.

 Signature of Physician

 Date



Arizona Division of Economic Security (ADES) Foster Grandparent Assignment Plan

Child's Name: _____ Date of Birth: _____

Date Assigned: _____ Work Area: _____

TO THE VOLUNTEER STATION SUPERVISOR: Foster Grandparents must be assigned to children with exceptional or special needs. Successful assignments will have a positive impact on the child. Please complete this form thoughtfully, documenting the child's need, the activities you want the volunteer to perform, the desired results of those activities, and the impact you hope those results will have on the child.

Example: Child cannot read and is falling behind grade level (problem); volunteer is asked to tutor (activity); desired result is that child will learn to read (accomplishment), and therefore be promoted with his class (impact).

Please be as specific and direct as possible, since this is the volunteer's assignment plan. Please go over it with him/her to be sure he/she understands the required activities and the desired results.

CHILD'S NEED THAT WARRANTS THIS VOLUNTEER ASSIGNMENT:

(Terms such as, "developmentally delayed" "homeless," or "speech impaired" etc. describe the conditions of the child. Here, please identify the specific NEED a client may have as a result of the condition.

Example, "Because of John's disability, he has never learned to feed himself, and needs someone to help him learn this.

VOLUNTEER SERVICE ACTIVITIES: (The volunteer's lunchtime can be included in his/her work hours only if it is taken with the child and listed as a service activity.)

ANTICIPATED ACCOMPLISHMENT(S) AS A RESULT OF ACTIVITIES LISTED ABOVE:

ANTICIPATED IMPACT OF ACCOMPLISHMENT(S) (This is not the same as accomplishment, see example above.)

Signature: Volunteer Station

Signature: Foster Grandparent

Signature (if applicable)
Child's Parent or Guardian

Signature: FGP Coordinator



Arizona Department of Economic Security (ADES) FOSTER GRANDPARENT PROGRAM Appeals Procedure

Step 1:

Foster Grandparent – discusses problem with supervisor. Verbal submission of problem must clearly inform the Supervisor that the Foster Grandparent is formally presenting the problem.

Supervisor – will obtain all pertinent facts relating to the Foster Grandparent's complaint. Review applicable policies, rules and regulations. Investigate circumstances which created the complaint. Determines if Foster Grandparent's complaint is valid or not. If considered to be valid, the Supervisor will take necessary action to pursue resolution of the Foster Grandparent's complaint. If not considered valid, the Supervisor will inform the Foster Grandparent of why the complaint is not considered to be valid.

Step 2:

Foster Grandparent – if the Foster Grandparent is dissatisfied with the Supervisor's verbal response, the Foster Grandparent can request to speak or meet with the FGP Project Director. Upon completion of discussion and review of all relevant information pertaining to the problem the Project Director will determine if the Foster Grandparent's complaint is valid or not. The Project Director will respond to the Foster Grandparent in written form concerning the resolution of the complaint. A copy of the Project Director's report will be given to the Foster Grandparent, Foster Grandparent's Supervisor and a copy will be placed in the personnel file of the Foster Grandparent.

Step 3:

Foster Grandparent – if the Foster Grandparent is dissatisfied with the Project Director's decision, he/she may submit in writing and request a review by the Foster Grandparent Program Advisory Council. The written problem will be submitted to the FGP Advisory Council Chairman within ten (10) calendar days. The Chairman will completely review the problem, call for and conduct a FGP Advisory Council meeting. The Council shall recommend to the Director of the Division of Aging and Adult Administration (DAAS) or his designee what action to take concerning the problem. The DAAS Director will notify in writing within fifteen (15) calendar days to the FGP Director action to be taken and the end result. In the event there is not an active FGP Advisory Council in session, the review of the appeal will be accomplished through the DAAS Director or his/her designee.

I have read and fully understand the above procedure. Also, I acknowledge that I have received a copy of this procedure.

Signature

Date

Month and Year: _____

Volunteer Station: _____

CERTIFICATION

Date	Service Hours				Mileage Reimbursement	Check each line for each day meal provided	<p>I certify that the amounts claimed on this report are correct to the best of my knowledge. Furthermore, my driver's license is valid and I have the minimum amount of vehicle insurance coverage as required by law for mileage reimbursement.</p>
	Direct	Community	Training	Remarks: briefly explain training			
							X
							Foster Grandparent Signature
							VERIFICATION I verify that this report reflects actual service hours performed and amounts claimed by the FGP.
							X
							Station Supervisor Signature

[illegible]

 X

FGP Director Signature

**Arizona Department of Economic Security (ADES)
Foster Grandparent Program
MONTHLY REPORT FORM
INSTRUCTIONS**

RECOGNITION: Should be provided to Foster Grandparents a minimum of twice a year. Events may consist of special ceremonies, birthdays, anniversary of their start date as a Foster Grandparent luncheons, recreational outings, etc. Informal recognition should be continuous, such as listening to and acting on recommendations by foster grandparents, offering honest praise and providing assignments that are increasingly satisfying.

INSERVICE TRAINING (REQUIRED): The Corporation for National Service/Senior Service Corps (federal agency that provides funding for the Foster Grandparent Program), requires that Foster Grandparents be provided training **a minimum of four hours (4) per month**. Teacher work days can be counted as trainings and we encourage the Foster Grandparent to attend these days to learn what the teacher is learning. If your Foster Grandparent attends a teacher work day please state the subject matter along with the fact it was a teacher work day. Staff meetings are not trainings. Sessions should be designed to make use of expertise of available project and volunteer station staff and other persons with related skills and experiences. Sessions are to provide Foster Grandparents with additional information about serving their assigned children/youth through cooperation with professional staff concerning activities and objectives at their respective volunteer stations. Sessions can be teacher work days or teachers explaining future work plans or ideas with the Foster Grandparent. Also, in-service training can be provided to Foster Grandparents in the form of information concerning government benefits, consumer updates, information on social agencies/providers and/or other related items that may be beneficial including referral services to assist in problems related to their physical, mental, financial and/or social well being.

MEALS: Only one meal per day can be reported.

PLEASE NOTE: Prior to returning the completed (original) form, please type or print the name of your volunteer station at the top of the form. Complete, sign, date and return the original before the due date. **Monthly reports are due at the end of the month reported. Each station should be sending these in with the time sheets for the last pay period of the month.**

If you have any question regarding this form please contact:

ADES Foster Grandparent Program
1789 West Jefferson St.
Phoenix, Arizona 85007
PHONE: 602-542-6365
FAX: 602-542-6575



ADES FOSTER GRANDPARENT PROGRAM VOLUNTEER STATION MONTHLY REPORT

Volunteer Station: _____ Month & Year: _____

RECOGNITION:

Date	Type of Recognition(s)	Cost of Recognition(s)
_____	_____	_____
_____	_____	_____
_____	_____	_____

INSERVICE TRAINING:

Date	Type of Training(s)	Number of Hours
_____	_____	_____
_____	_____	_____
_____	_____	_____

MEALS:

Cost per meal: \$ _____

Total number of meals provided to volunteers this month: _____

Total cost of meals provided to volunteers this month: \$ _____

PLEASE NOTE: Only one meal per day per volunteer can be counted as an in-kind contribution on this Monthly Report Form.

To the best of my knowledge, I certify that none of the above reported costs are from federal funds.

Signature of Volunteer Station Supervisor

Signature of FGP Director

Date: _____

Date Report Received: _____



Foster Grandparent Program

Student Improvement Survey Education

School & Address _____

Foster Grandparent Name _____

Classroom Teacher's Name _____

Child's Name _____ Grade _____

Instructions: Foster Grandparents please complete the information below, and turn in the survey to the Volunteer Station Representative in your school's front office or fax the survey to Mary Weston at 602-542-6575. If you have any questions, please call 602-542-6365.

Has the student you volunteered with improved in reading or other subject areas.
Yes ____ No ____

Have you seen a positive change in the student(s) behavior and/or attitude?
Yes ____ No ____

COMMENTS: _____

Foster Grandparent Volunteer

Date

DES FGP Coordinator

Date



Foster Grandparent Program

Student Improvement Survey Head Start/Mentoring

School & Address _____

Foster Grandparent Name _____

Classroom Teacher's Name _____

Child's Name _____ Grade _____

Instructions: Foster Grandparents please complete the information below, and turn in the survey to the Volunteer Station Representative in your school's front office or fax the survey to Mary Weston at 602-542-6575. If you have any questions, please call 602-542-6365.

Since you have been working with this student, have you seen an increase in the student's ability to recognize colors, numbers, and/or letters of the alphabet?

Yes ____ No ____

Have you seen a positive change in the student(s) behavior and/or attitude?

Yes ____ No ____

COMMENTS: _____

Foster Grandparent Volunteer

Date

DES FGP Coordinator

Date

DIVISION OF AGING & ADULT SERVICES						
CONTRACT OBLIGATION FOR SFY 2009						
REGION 1	SFY 2008 CARRYOVER	INITIAL SFY 2009 ALERTS	TOTAL SFY 2009 ALERTS	INCREASE (DECREASE) SFY 2009 ALERTS	REVISED TOTAL SFY 2009 AWARDS	
1. STATE ADMIN.	\$ -	\$ 763,286.00	\$ 763,286.00	\$ -	\$ 763,286.00	
2. OAA ADMIN. III C-1	\$ -	\$ 663,392.00	\$ 663,392.00	\$ -	\$ 663,392.00	
3. OAA ADMIN. III-E	\$ -	\$ 139,518.00	\$ 139,518.00	\$ -	\$ 139,518.00	
4. SSBG ADMIN.	\$ -	\$ 189,056.00	\$ 189,056.00	\$ -	\$ 189,056.00	
5. CAPACITY BUILDING	\$ -	\$ 713,644.00	\$ 713,644.00	\$ -	\$ 713,644.00	
6. TITLE III-B	\$ -	\$ 2,791,574.00	\$ 2,791,574.00	\$ -	\$ 2,791,574.00	
7. TITLE III-C1	\$ -	\$ 2,117,492.00	\$ 2,117,492.00	\$ -	\$ 2,117,492.00	
8. TITLE III-C2	\$ -	\$ 1,695,526.00	\$ 1,695,526.00	\$ -	\$ 1,695,526.00	
9. TITLE III-D	\$ -	\$ 176,586.00	\$ 176,586.00	\$ -	\$ 176,586.00	
10. TITLE III-E CAREGIVER	\$ -	\$ 1,168,005.00	\$ 1,168,005.00	\$ -	\$ 1,168,005.00	
11. NSIP	\$ -	\$ 583,057.00	\$ 583,057.00	\$ -	\$ 583,057.00	
12. TITLE VII ELDER ABUSE	\$ -	\$ 31,015.00	\$ 31,015.00	\$ -	\$ 31,015.00	
13. TITLE VII FED. OMB	\$ -	\$ 126,169.00	\$ 126,169.00	\$ -	\$ 126,169.00	
14. STATE IND. LIVING SUPPORTS	\$ -	\$ 6,237,811.00	\$ 6,237,811.00	\$ -	\$ 6,237,811.00	
15. STATE OMBUDSMAN	\$ -	\$ 395,301.00	\$ 395,301.00	\$ -	\$ 395,301.00	
16. STATE RESPITE	\$ -	\$ 236,459.00	\$ 236,459.00	\$ -	\$ 236,459.00	
17. SSBG (SERVICES)	\$ -	\$ 1,759,423.00	\$ 1,759,423.00	\$ -	\$ 1,759,423.00	
18. S.H.I.P.	\$ -	\$ 144,381.00	\$ 144,381.00	\$ -	\$ 144,381.00	
19. SENIOR PATROL	\$ -	\$ 12,578.00	\$ 12,578.00	\$ -	\$ 12,578.00	
20. AZPOMS	\$ -	\$ -	\$ -	\$ -	\$ -	
21. KINSHIP CARE	\$ -	\$ 413,731.00	\$ 413,731.00	\$ -	\$ 413,731.00	
22. LIFESPAN RESPITE	\$ -	\$ 192,500.00	\$ 192,500.00	\$ -	\$ 192,500.00	
TOTAL	\$ -	\$20,550,504.00	\$ 20,550,504.00	\$ -	\$20,550,504.00	

DIVISION OF AGING & ADULT SERVICES						
CONTRACT OBLIGATION FOR SFY 2009						
REGION 2	SFY 2008 CARRYOVER	INITIAL SFY 2009 ALERTS	TOTAL SFY 2009 ALERTS	INCREASE (DECREASE) SFY 2009 ALERTS	REVISED TOTAL SFY 2009 AWARDS	
1. STATE ADMIN.	\$ -	\$ 370,613.00	\$ 370,613.00	\$ -	\$ 370,613.00	
2. OAA ADMIN. III C-1	\$ -	\$ 263,383.00	\$ 263,383.00	\$ -	\$ 263,383.00	
3. OAA ADMIN. III-E	\$ -	\$ 47,027.00	\$ 47,027.00	\$ -	\$ 47,027.00	
4. SSBG ADMIN.	\$ -	\$ 5,594.00	\$ 5,594.00	\$ -	\$ 5,594.00	
5. CAPACITY BUILDING	\$ -	\$ 64,500.00	\$ 64,500.00	\$ -	\$ 64,500.00	
6. TITLE III-B	\$ -	\$ 987,314.00	\$ 987,314.00	\$ -	\$ 987,314.00	
7. TITLE III-C1	\$ -	\$ 753,914.00	\$ 753,914.00	\$ -	\$ 753,914.00	
8. TITLE III-C2	\$ -	\$ 593,567.00	\$ 593,567.00	\$ -	\$ 593,567.00	
9. TITLE III-D	\$ -	\$ 61,498.00	\$ 61,498.00	\$ -	\$ 61,498.00	
10. TITLE III-E CAREGIVER	\$ -	\$ 406,765.00	\$ 406,765.00	\$ -	\$ 406,765.00	
11. NSIP	\$ -	\$ 188,346.00	\$ 188,346.00	\$ -	\$ 188,346.00	
12. TITLE VII ELDER ABUSE	\$ -	\$ 10,801.00	\$ 10,801.00	\$ -	\$ 10,801.00	
13. TITLE VII FED. OMB	\$ -	\$ 43,939.00	\$ 43,939.00	\$ -	\$ 43,939.00	
14. STATE IND. LIVING SUPPORTS	\$ -	\$ 1,037,664.00	\$ 1,037,664.00	\$ -	\$ 1,037,664.00	
15. STATE OMBUDSMAN	\$ -	\$ 197,057.00	\$ 197,057.00	\$ -	\$ 197,057.00	
16. STATE RESPITE	\$ -	\$ 81,773.00	\$ 81,773.00	\$ -	\$ 81,773.00	
17. SSBG (SERVICES)	\$ -	\$ 21,116.00	\$ 21,116.00	\$ -	\$ 21,116.00	
18. S.H.I.P.	\$ -	\$ 71,716.00	\$ 71,716.00	\$ -	\$ 71,716.00	
19. SENIOR PATROL	\$ -	\$ 12,578.00	\$ 12,578.00	\$ -	\$ 12,578.00	
20. AZPOMS	\$ -	\$ -	\$ -	\$ -	\$ -	
21. KINSHIP CARE	\$ -	\$ 145,770.00	\$ 145,770.00	\$ -	\$ 145,770.00	
22. LIFESPAN RESPITE	\$ -	\$ 52,500.00	\$ 52,500.00	\$ -	\$ 52,500.00	
23. DIRECT CARE CURRICULUM	\$ -	\$ 60,000.00	\$ 100,000.00	\$ -	\$ 100,000.00	
24. REFUGEE RESETTLEMENT	\$ -	\$ 34,000.00	\$ 34,000.00	\$ -	\$ 34,000.00	
25. FOSTER GRANDPARENT PROGRAM	\$ -	\$ -	\$ -	\$ 30,000.00	\$ 30,000.00	
TOTAL	\$ -	\$ 5,511,435.00	\$ 5,551,435.00	\$ 30,000.00	\$ 5,581,435.00	

DIVISION OF AGING & ADULT SERVICES						
CONTRACT OBLIGATION FOR SFY 2009						
REGION 3	SFY 2008 CARRYOVER	INITIAL SFY 2009 ALERTS	TOTAL SFY 2009 ALERTS	INCREASE (DECREASE) SFY 2009 ALERTS	REVISED TOTAL SFY 2009 AWARDS	
1. STATE ADMIN.	\$ -	\$ 164,305.00	\$ 164,305.00	\$ -	\$ 164,305.00	
2. OAA ADMIN. III C-1	\$ -	\$ 147,205.00	\$ 147,205.00	\$ -	\$ 147,205.00	
3. OAA ADMIN. III-E	\$ -	\$ 20,164.00	\$ 20,164.00	\$ -	\$ 20,164.00	
4. SSBG ADMIN.	\$ -	\$ 28,276.00	\$ 28,276.00	\$ -	\$ 28,276.00	
5. CAPACITY BUILDING	\$ -	\$ 5,839.00	\$ 5,839.00	\$ -	\$ 5,839.00	
6. TITLE III-B	\$ -	\$ 536,847.00	\$ 536,847.00	\$ -	\$ 536,847.00	
7. TITLE III-C1	\$ -	\$ 414,193.00	\$ 414,193.00	\$ -	\$ 414,193.00	
8. TITLE III-C2	\$ -	\$ 317,562.00	\$ 317,562.00	\$ -	\$ 317,562.00	
9. TITLE III-D	\$ -	\$ 32,625.00	\$ 32,625.00	\$ -	\$ 32,625.00	
10. TITLE III-E CAREGIVER	\$ -	\$ 215,795.00	\$ 215,795.00	\$ -	\$ 215,795.00	
11. NSIP	\$ -	\$ 217,585.00	\$ 217,585.00	\$ -	\$ 217,585.00	
12. TITLE VII ELDER ABUSE	\$ -	\$ 5,730.00	\$ 5,730.00	\$ -	\$ 5,730.00	
13. TITLE VII FED. OMB	\$ -	\$ 23,310.00	\$ 23,310.00	\$ -	\$ 23,310.00	
14. STATE IND. LIVING SUPPORTS	\$ -	\$ 1,400,161.00	\$ 1,400,161.00	\$ -	\$ 1,400,161.00	
15. STATE OMBUDSMAN	\$ -	\$ 46,376.00	\$ 46,376.00	\$ -	\$ 46,376.00	
16. STATE RESPITE	\$ -	\$ 32,204.00	\$ 32,204.00	\$ -	\$ 32,204.00	
17. SSBG (SERVICES)	\$ -	\$ 425,706.00	\$ 425,706.00	\$ -	\$ 425,706.00	
18. S.H.I.P.	\$ -	\$ 41,662.00	\$ 41,662.00	\$ -	\$ 41,662.00	
19. SENIOR PATROL	\$ -	\$ 12,578.00	\$ 12,578.00	\$ -	\$ 12,578.00	
20. AZPOMS	\$ -	\$ -	\$ -	\$ -	\$ -	
21. KINSHIP CARE	\$ -	\$ 140,146.00	\$ 140,146.00	\$ -	\$ 140,146.00	
22. LIFESPAN RESPITE	\$ -	\$ 26,250.00	\$ 26,250.00	\$ -	\$ 26,250.00	
TOTAL	\$ -	\$ 4,254,519.00	\$ 4,254,519.00	\$ -	\$ 4,254,519.00	

DIVISION OF AGING & ADULT SERVICES						
CONTRACT OBLIGATION FOR SFY 2009						
REGION 4	SFY 2008 CARRYOVER	INITIAL SFY 2009 ALERTS	TOTAL SFY 2009 ALERTS	INCREASE (DECREASE) SFY 2009 ALERTS	REVISED TOTAL SFY 2009 AWARDS	
1. STATE ADMIN.	\$ -	\$ 132,212.00	\$ 132,212.00	\$ -	\$ 132,212.00	
2. OAA ADMIN. III C-1	\$ -	\$ 166,934.00	\$ 166,934.00	\$ -	\$ 166,934.00	
3. OAA ADMIN. III-E	\$ -	\$ 24,726.00	\$ 24,726.00	\$ -	\$ 24,726.00	
4. SSBG ADMIN.	\$ -	\$ 35,653.00	\$ 35,653.00	\$ -	\$ 35,653.00	
5. CAPACITY BUILDING	\$ -	\$ -	\$ -	\$ -	\$ -	
6. TITLE III-B	\$ -	\$ 585,813.00	\$ 585,813.00	\$ -	\$ 585,813.00	
7. TITLE III-C1	\$ -	\$ 450,807.00	\$ 450,807.00	\$ -	\$ 450,807.00	
8. TITLE III-C2	\$ -	\$ 347,947.00	\$ 347,947.00	\$ -	\$ 347,947.00	
9. TITLE III-D	\$ -	\$ 35,824.00	\$ 35,824.00	\$ -	\$ 35,824.00	
10. TITLE III-E CAREGIVER	\$ -	\$ 236,951.00	\$ 236,951.00	\$ -	\$ 236,951.00	
11. NSIP	\$ -	\$ 153,604.00	\$ 153,604.00	\$ -	\$ 153,604.00	
12. TITLE VII ELDER ABUSE	\$ -	\$ 6,292.00	\$ 6,292.00	\$ -	\$ 6,292.00	
13. TITLE VII FED. OMB	\$ -	\$ 25,596.00	\$ 25,596.00	\$ -	\$ 25,596.00	
14. STATE IND. LIVING SUPPORTS	\$ -	\$ 1,350,881.00	\$ 1,350,881.00	\$ -	\$ 1,350,881.00	
15. STATE OMBUDSMAN	\$ -	\$ 43,095.00	\$ 43,095.00	\$ -	\$ 43,095.00	
16. STATE RESPITE	\$ -	\$ 32,712.00	\$ 32,712.00	\$ -	\$ 32,712.00	
17. SSBG (SERVICES)	\$ -	\$ 380,345.00	\$ 380,345.00	\$ -	\$ 380,345.00	
18. S.H.I.P.	\$ -	\$ 39,901.00	\$ 39,901.00	\$ -	\$ 39,901.00	
19. SENIOR PATROL	\$ -	\$ 12,578.00	\$ 12,578.00	\$ -	\$ 12,578.00	
20. AZPOMS	\$ -	\$ -	\$ -	\$ -	\$ -	
21. KINSHIP CARE	\$ -	\$ 63,177.00	\$ 63,177.00	\$ -	\$ 63,177.00	
22. LIFESPAN RESPITE	\$ -	\$ 26,250.00	\$ 26,250.00	\$ -	\$ 26,250.00	
22. FOSTER GRANDPARENT PROGRAM	\$ -	\$ -	\$ -	\$ 18,333.00	\$ 18,333.00	
TOTAL	\$ -	\$ 4,151,298.00	\$ 4,151,298.00	\$ 18,333.00	\$ 4,169,631.00	

DIVISION OF AGING & ADULT SERVICES						
CONTRACT OBLIGATION FOR SFY 2009						
REGION 5	SFY 2008 CARRYOVER	INITIAL SFY 2009 ALERTS	TOTAL SFY 2009 ALERTS	INCREASE (DECREASE) SFY 2009 ALERTS	REVISED TOTAL SFY 2009 AWARDS	
1. STATE ADMIN.	\$ -	\$ 113,099.00	\$ 113,099.00	\$ -	\$ 113,099.00	
2. OAA ADMIN. III C-1	\$ -	\$ 127,372.00	\$ 127,372.00	\$ -	\$ 127,372.00	
3. OAA ADMIN. III-E	\$ -	\$ 15,578.00	\$ 15,578.00	\$ -	\$ 15,578.00	
4. SSBG ADMIN.	\$ -	\$ 33,739.00	\$ 33,739.00	\$ -	\$ 33,739.00	
5. CAPACITY BUILDING	\$ -	\$ 199,312.00	\$ 199,312.00	\$ -	\$ 199,312.00	
6. TITLE III-B	\$ -	\$ 397,752.00	\$ 397,752.00	\$ -	\$ 397,752.00	
7. TITLE III-C1	\$ -	\$ 308,584.00	\$ 308,584.00	\$ -	\$ 308,584.00	
8. TITLE III-C2	\$ -	\$ 233,202.00	\$ 233,202.00	\$ -	\$ 233,202.00	
9. TITLE III-D	\$ -	\$ 23,846.00	\$ 23,846.00	\$ -	\$ 23,846.00	
10. TITLE III-E CAREGIVER	\$ -	\$ 157,725.00	\$ 157,725.00	\$ -	\$ 157,725.00	
11. NSIP	\$ -	\$ 121,549.00	\$ 121,549.00	\$ -	\$ 121,549.00	
12. TITLE VII ELDER ABUSE	\$ -	\$ 4,188.00	\$ 4,188.00	\$ -	\$ 4,188.00	
13. TITLE VII FED. OMB	\$ -	\$ 17,037.00	\$ 17,037.00	\$ -	\$ 17,037.00	
14. STATE IND. LIVING SUPPORTS	\$ -	\$ 959,445.00	\$ 959,445.00	\$ -	\$ 959,445.00	
15. STATE OMBUDSMAN	\$ -	\$ 37,080.00	\$ 37,080.00	\$ -	\$ 37,080.00	
16. STATE RESPITE	\$ -	\$ 21,369.00	\$ 21,369.00	\$ -	\$ 21,369.00	
17. SSBG (SERVICES)	\$ -	\$ 230,136.00	\$ 230,136.00	\$ -	\$ 230,136.00	
18. S.H.I.P.	\$ -	\$ 34,881.00	\$ 34,881.00	\$ -	\$ 34,881.00	
19. SENIOR PATROL	\$ -	\$ 12,578.00	\$ 12,578.00	\$ -	\$ 12,578.00	
20. AZPOMS	\$ -	\$ -	\$ -	\$ -	\$ -	
21. KINSHIP CARE	\$ -	\$ 67,980.00	\$ 67,980.00	\$ -	\$ 67,980.00	
22. LIFESPAN RESPITE	\$ -	\$ 17,500.00	\$ 17,500.00	\$ -	\$ 17,500.00	
23. DIRECT CARE CURRICULUM	\$ -	\$ 40,000.00	\$ -	\$ -	\$ -	
TOTAL	\$ -	\$ 3,173,952.00	\$ 3,133,952.00	\$ -	\$ 3,133,952.00	

DIVISION OF AGING & ADULT SERVICES						
CONTRACT OBLIGATION FOR SFY 2009						
REGION 6	SFY 2008 CARRYOVER	INITIAL SFY 2009 ALERTS	TOTAL SFY 2009 ALERTS	INCREASE (DECREASE) SFY 2009 ALERTS	REVISED TOTAL SFY 2009 AWARDS	
1. STATE ADMIN.	\$ -	\$ 107,206.00	\$ 107,206.00	\$ -	\$ 107,206.00	
2. OAA ADMIN. III C-1	\$ -	\$ 110,152.00	\$ 110,152.00	\$ -	\$ 110,152.00	
3. OAA ADMIN. III-E	\$ -	\$ 11,596.00	\$ 11,596.00	\$ -	\$ 11,596.00	
4. SSBG ADMIN.	\$ -	\$ 26,724.00	\$ 26,724.00	\$ -	\$ 26,724.00	
5. CAPACITY BUILDING	\$ -	\$ 169,161.00	\$ 169,161.00	\$ -	\$ 169,161.00	
6. TITLE III-B	\$ -	\$ 314,245.00	\$ 314,245.00	\$ -	\$ 314,245.00	
7. TITLE III-C1	\$ -	\$ 245,417.00	\$ 245,417.00	\$ -	\$ 245,417.00	
8. TITLE III-C2	\$ -	\$ 182,270.00	\$ 182,270.00	\$ -	\$ 182,270.00	
9. TITLE III-D	\$ -	\$ 18,530.00	\$ 18,530.00	\$ -	\$ 18,530.00	
10. TITLE III-E CAREGIVER	\$ -	\$ 122,564.00	\$ 122,564.00	\$ -	\$ 122,564.00	
11. NSIP	\$ -	\$ 80,302.00	\$ 80,302.00	\$ -	\$ 80,302.00	
12. TITLE VII ELDER ABUSE	\$ -	\$ 3,255.00	\$ 3,255.00	\$ -	\$ 3,255.00	
13. TITLE VII FED. OMB	\$ -	\$ 13,239.00	\$ 13,239.00	\$ -	\$ 13,239.00	
14. STATE IND. LIVING SUPPORTS	\$ -	\$ 911,166.00	\$ 911,166.00	\$ -	\$ 911,166.00	
15. STATE OMBUDSMAN	\$ -	\$ 35,207.00	\$ 35,207.00	\$ -	\$ 35,207.00	
16. STATE RESPITE	\$ -	\$ 18,481.00	\$ 18,481.00	\$ -	\$ 18,481.00	
17. SSBG (SERVICES)	\$ -	\$ 350,488.00	\$ 350,488.00	\$ -	\$ 350,488.00	
18. S.H.I.P.	\$ -	\$ 31,201.00	\$ 31,201.00	\$ -	\$ 31,201.00	
19. SENIOR PATROL	\$ -	\$ 12,578.00	\$ 12,578.00	\$ -	\$ 12,578.00	
20. AZPOMS	\$ -	\$ -	\$ -	\$ -	\$ -	
21. KINSHIP CARE	\$ -	\$ 78,286.00	\$ 78,286.00	\$ -	\$ 78,286.00	
22. LIFESPAN RESPITE	\$ -	\$ 17,500.00	\$ 17,500.00	\$ -	\$ 17,500.00	
TOTAL	\$ -	\$ 2,859,568.00	\$ 2,859,568.00	\$ -	\$ 2,859,568.00	

DIVISION OF AGING & ADULT SERVICES						
CONTRACT OBLIGATION FOR SFY 2009						
REGION 7	SFY 2008 CARRYOVER	INITIAL SFY 2009 ALERTS	TOTAL SFY 2009 ALERTS	INCREASE (DECREASE) SFY 2009 ALERTS	REVISED TOTAL SFY 2009 AWARDS	
1. STATE ADMIN.	\$ -	\$ 16,268.00	\$ 16,268.00	\$ -	\$ 16,268.00	
2. OAA ADMIN. III C-1	\$ -	\$ 123,820.00	\$ 123,820.00	\$ -	\$ 123,820.00	
3. OAA ADMIN. III-E	\$ -	\$ 14,757.00	\$ 14,757.00	\$ -	\$ 14,757.00	
4. SSBG ADMIN.	\$ -	\$ -	\$ -	\$ -	\$ -	
5. CAPACITY BUILDING	\$ -	\$ 149,393.00	\$ 149,393.00	\$ -	\$ 149,393.00	
6. TITLE III-B	\$ -	\$ 382,370.00	\$ 382,370.00	\$ -	\$ 382,370.00	
7. TITLE III-C1	\$ -	\$ 314,054.00	\$ 314,054.00	\$ -	\$ 314,054.00	
8. TITLE III-C2	\$ -	\$ 222,788.00	\$ 222,788.00	\$ -	\$ 222,788.00	
9. TITLE III-D	\$ -	\$ 22,835.00	\$ 22,835.00	\$ -	\$ 22,835.00	
10. TITLE III-E CAREGIVER	\$ -	\$ 152,992.00	\$ 152,992.00	\$ -	\$ 152,992.00	
11. NSIP	\$ -	\$ 417,892.00	\$ 417,892.00	\$ -	\$ 417,892.00	
12. TITLE VII ELDER ABUSE	\$ -	\$ 4,202.00	\$ 4,202.00	\$ -	\$ 4,202.00	
13. TITLE VII FED. OMB	\$ -	\$ 16,432.00	\$ 16,432.00	\$ -	\$ 16,432.00	
14. STATE IND. LIVING SUPPORTS	\$ -	\$ 110,416.00	\$ 110,416.00	\$ -	\$ 110,416.00	
15. STATE OMBUDSMAN	\$ -	\$ 30,000.00	\$ 30,000.00	\$ -	\$ 30,000.00	
16. STATE RESPITE	\$ -	\$ 6,000.00	\$ 6,000.00	\$ -	\$ 6,000.00	
17. SSBG (SERVICES)	\$ -	\$ -	\$ -	\$ -	\$ -	
18. S.H.I.P.	\$ -	\$ 25,429.00	\$ 25,429.00	\$ -	\$ 25,429.00	
19. SENIOR PATROL	\$ -	\$ 12,578.00	\$ 12,578.00	\$ -	\$ 12,578.00	
20. AZPOMS	\$ -	\$ -	\$ -	\$ -	\$ -	
21. NAVAJO SENIOR CTRS.	\$ -	\$ -	\$ -	\$ -	\$ -	
22. KINSHIP CARE	\$ -	\$ 45,455.00	\$ 45,455.00	\$ -	\$ 45,455.00	
23. LIFESPAN RESPITE	\$ -	\$ 8,750.00	\$ 8,750.00	\$ -	\$ 8,750.00	
TOTAL	\$ -	\$ 2,076,431.00	\$ 2,076,431.00	\$ -	\$ 2,076,431.00	

DIVISION OF AGING & ADULT SERVICES						
CONTRACT OBLIGATION FOR SFY 2009						
REGION 8	SFY 2008 CARRYOVER	INITIAL SFY 2009 ALERTS	TOTAL SFY 2009 ALERTS	INCREASE (DECREASE) SFY 2009 ALERTS	REVISED TOTAL SFY 2009 AWARDS	
1. STATE ADMIN.	\$ -	\$ 18,318.00	\$ 18,318.00	\$ -	\$ 18,318.00	
2. OAA ADMIN. III C-1	\$ -	\$ 153,947.00	\$ 153,947.00	\$ -	\$ 153,947.00	
3. OAA ADMIN. III-E	\$ -	\$ 21,723.00	\$ 21,723.00	\$ -	\$ 21,723.00	
4. SSBG ADMIN.	\$ -	\$ -	\$ -	\$ -	\$ -	
5. CAPACITY BUILDING	\$ -	\$ 152,408.00	\$ 152,408.00	\$ -	\$ 152,408.00	
6. TITLE III-B	\$ -	\$ 485,130.00	\$ 485,130.00	\$ -	\$ 485,130.00	
7. TITLE III-C1	\$ -	\$ 374,302.00	\$ 374,302.00	\$ -	\$ 374,302.00	
8. TITLE III-C2	\$ -	\$ 286,958.00	\$ 286,958.00	\$ -	\$ 286,958.00	
9. TITLE III-D	\$ -	\$ 29,480.00	\$ 29,480.00	\$ -	\$ 29,480.00	
10. TITLE III-E CAREGIVER	\$ -	\$ 194,994.00	\$ 194,994.00	\$ -	\$ 194,994.00	
11. NSIP	\$ -	\$ 93,911.00	\$ 93,911.00	\$ -	\$ 93,911.00	
12. TITLE VII ELDER ABUSE	\$ -	\$ 5,178.00	\$ 5,178.00	\$ -	\$ 5,178.00	
13. TITLE VII FED. OMB	\$ -	\$ 21,063.00	\$ 21,063.00	\$ -	\$ 21,063.00	
14. STATE IND. LIVING SUPPORTS	\$ -	\$ 128,863.00	\$ 128,863.00	\$ -	\$ 128,863.00	
15. STATE OMBUDSMAN	\$ -	\$ 30,000.00	\$ 30,000.00	\$ -	\$ 30,000.00	
16. STATE RESPITE	\$ -	\$ 6,000.00	\$ 6,000.00	\$ -	\$ 6,000.00	
17. SSBG (SERVICES)	\$ -	\$ -	\$ -	\$ -	\$ -	
18. S.H.I.P.	\$ -	\$ 25,429.00	\$ 25,429.00	\$ -	\$ 25,429.00	
19. SENIOR PATROL	\$ -	\$ 12,578.00	\$ 12,578.00	\$ -	\$ 12,578.00	
20. AZPOMS	\$ -	\$ -	\$ -	\$ -	\$ -	
21. KINSHIP CARE	\$ -	\$ 45,455.00	\$ 45,455.00	\$ -	\$ 45,455.00	
22. LIFESPAN RESPITE	\$ -	\$ 8,750.00	\$ 8,750.00	\$ -	\$ 8,750.00	
TOTAL	\$ -	\$ 2,094,487.00	\$ 2,094,487.00	\$ -	\$ 2,094,487.00	

DIVISION OF AGING & ADULT SERVICES						
CONTRACT OBLIGATION FOR SFY 2009						
REGION 9	SFY 2008 CARRYOVER	INITIAL SFY 2009 ALERTS	TOTAL SFY 2009 ALERTS	INCREASE (DECREASE) SFY 2009 ALERTS	REVISED TOTAL SFY 2009 AWARDS	
1. STATE ADMIN.	\$ -	\$ -	\$ -	\$ -	\$ -	
2. OAA ADMIN. III C-1	\$ -	\$ -	\$ -	\$ -	\$ -	
3. OAA ADMIN. III-E	\$ -	\$ -	\$ -	\$ -	\$ -	
4. SSBG ADMIN.	\$ -	\$ -	\$ -	\$ -	\$ -	
5. CAPACITY BUILDING	\$ -	\$ -	\$ -	\$ -	\$ -	
6. TITLE III-B	\$ -	\$ -	\$ -	\$ -	\$ -	
7. TITLE III-C1	\$ -	\$ -	\$ -	\$ -	\$ -	
8. TITLE III-C2	\$ -	\$ -	\$ -	\$ -	\$ -	
9. TITLE III-D	\$ -	\$ -	\$ -	\$ -	\$ -	
10. TITLE III-E CAREGIVER	\$ -	\$ -	\$ -	\$ -	\$ -	
11. NSIP	\$ -	\$ -	\$ -	\$ -	\$ -	
12. TITLE VII ELDER ABUSE	\$ -	\$ -	\$ -	\$ -	\$ -	
13. TITLE VII FED. OMB	\$ -	\$ -	\$ -	\$ -	\$ -	
14. STATE IND. LIVING SUPPORTS	\$ -	\$ 2,019,025.00	\$ 2,019,025.00	\$ -	\$ 2,019,025.00	
15. STATE OMBUDSMAN	\$ -	\$ -	\$ -	\$ -	\$ -	
16. STATE RESPITE	\$ -	\$ -	\$ -	\$ -	\$ -	
17. SSBG (SERVICES)	\$ -	\$ 1,118,877.00	\$ 1,118,877.00	\$ -	\$ 1,118,877.00	
18. S.H.I.P.	\$ -	\$ -	\$ -	\$ -	\$ -	
19. SENIOR PATROL	\$ -	\$ -	\$ -	\$ -	\$ -	
20. AZPOMS	\$ -	\$ -	\$ -	\$ -	\$ -	
21. KINSHIP CARE	\$ -	\$ -	\$ -	\$ -	\$ -	
22. LIFESPAN RESPITE	\$ -	\$ -	\$ -	\$ -	\$ -	
TOTAL	\$ -	\$ 3,137,902.00	\$ 3,137,902.00	\$ -	\$ 3,137,902.00	

DIVISION OF AGING & ADULT SERVICES					
CONTRACT OBLIGATION FOR SFY 2009					
STATE TOTAL	SFY 2008 CARRYOVER	INITIAL SFY 2009 ALERTS	TOTAL SFY 2009 AWARDS	INCREASE/ (DECREASE) SFY 2009 ALERTS	REVISED TOTAL SFY 2009 AWARDS
1. STATE ADMIN.	\$ -	\$ 1,685,307.00	\$ 1,685,307.00	\$ -	\$ 1,685,307.00
2. OAA ADMIN. III C-1	\$ -	\$ 1,756,205.00	\$ 1,756,205.00	\$ -	\$ 1,756,205.00
3. OAA ADMIN. III-E	\$ -	\$ 295,089.00	\$ 295,089.00	\$ -	\$ 295,089.00
4. SSBG ADMIN.	\$ -	\$ 319,042.00	\$ 319,042.00	\$ -	\$ 319,042.00
5. CAPACITY BUILDING	\$ -	\$ 1,454,257.00	\$ 1,454,257.00	\$ -	\$ 1,454,257.00
6. TITLE III-B	\$ -	\$ 6,481,045.00	\$ 6,481,045.00	\$ -	\$ 6,481,045.00
7. TITLE III-C1	\$ -	\$ 4,978,763.00	\$ 4,978,763.00	\$ -	\$ 4,978,763.00
8. TITLE III-C2	\$ -	\$ 3,879,820.00	\$ 3,879,820.00	\$ -	\$ 3,879,820.00
9. TITLE III-D	\$ -	\$ 401,224.00	\$ 401,224.00	\$ -	\$ 401,224.00
10. TITLE III-E CAREGIVER	\$ -	\$ 2,655,791.00	\$ 2,655,791.00	\$ -	\$ 2,655,791.00
11. NSIP	\$ -	\$ 1,856,246.00	\$ 1,856,246.00	\$ -	\$ 1,856,246.00
12. TITLE VII ELDER ABUSE	\$ -	\$ 70,661.00	\$ 70,661.00	\$ -	\$ 70,661.00
13. TITLE VII FED. OMB	\$ -	\$ 286,785.00	\$ 286,785.00	\$ -	\$ 286,785.00
14. STATE IND. LIVING SUPPORTS	\$ -	\$ 14,155,432.00	\$ 14,155,432.00	\$ -	\$ 14,155,432.00
15. STATE OMBUDSMAN	\$ -	\$ 814,116.00	\$ 814,116.00	\$ -	\$ 814,116.00
16. STATE RESPITE	\$ -	\$ 434,998.00	\$ 434,998.00	\$ -	\$ 434,998.00
17. SSBG (SERVICES)	\$ -	\$ 4,286,091.00	\$ 4,286,091.00	\$ -	\$ 4,286,091.00
18. S.H.I.P.	\$ -	\$ 414,600.00	\$ 414,600.00	\$ -	\$ 414,600.00
19. SENIOR PATROL	\$ -	\$ 100,624.00	\$ 100,624.00	\$ -	\$ 100,624.00
20. AZPOMS	\$ -	\$ -	\$ -	\$ -	\$ -
21. NAVAJO SENIOR CTR.	\$ -	\$ -	\$ -	\$ -	\$ -
22. KINSHIP CARE	\$ -	\$ 1,000,000.00	\$ 1,000,000.00	\$ -	\$ 1,000,000.00
23. LIFESPAN RESPITE	\$ -	\$ 350,000.00	\$ 350,000.00	\$ -	\$ 350,000.00
24. DIRECT CARE CURRICULUM	\$ -	\$ 100,000.00	\$ 100,000.00	\$ -	\$ 100,000.00
25. REFUGEE RESETTLEMENT	\$ -	\$ 34,000.00	\$ 34,000.00	\$ -	\$ 34,000.00
26. FOSTER GRANDPARENT PROGRAM	\$ -	\$ -	\$ -	\$ 48,333.00	\$ 48,333.00
TOTAL	\$ -	\$ 47,810,096.00	\$ 47,810,096.00	\$ 48,333.00	\$ 47,858,429.00

DIVISION OF AGING & ADULT SERVICES					
CONTRACT OBLIGATION FOR SFY 2009					
STATE TOTAL	SFY 2008 CARRYOVER	INITIAL SFY 2009 ALERTS	TOTAL SFY 2009 AWARDS	REVISED SFY 2009 ALERTS	REVISED TOTAL SFY 2009 AWARDS
STATE ADMIN.	\$ -	\$ 1,685,307.00	\$ 1,685,307.00	\$ -	\$ 1,685,307.00
OLDER AMERICANS ACT	\$ -	\$ 20,805,383.00	\$ 20,805,383.00	\$ -	\$ 20,805,383.00
STATE (ILS, CB, RSP, OMB, LRCP, DCC)	\$ -	\$ 17,958,803.00	\$ 17,958,803.00	\$ -	\$ 17,958,803.00
SSBG REGIONS 1-9	\$ -	\$ 4,605,133.00	\$ 4,605,133.00	\$ -	\$ 4,605,133.00
S.H.I.P./SENIOR PATROL	\$ -	\$ 515,224.00	\$ 515,224.00	\$ -	\$ 515,224.00
NSIP	\$ -	\$ 1,856,246.00	\$ 1,856,246.00	\$ -	\$ 1,856,246.00
AZPOMS	\$ -	\$ -	\$ -	\$ -	\$ -
KINSHIP CARE	\$ -	\$ 350,000.00	\$ 350,000.00	\$ -	\$ 350,000.00
REFUGEE RESETTLEMENT	\$ -	\$ 34,000.00	\$ 34,000.00	\$ -	\$ 34,000.00
FOSTER GRANDPARENT PROGRAM	\$ -	\$ -	\$ -	\$ 48,333.00	\$ 48,333.00
BELOW-THE-LINE SUBTOTAL	\$ -	\$ 47,810,096.00	\$ 47,810,096.00	\$ 48,333.00	\$ 47,858,429.00
NAVAJO SENIOR CTR. TOTAL	\$ -	\$ -	\$ -	\$ -	\$ -
TOTAL	\$ -	\$ 47,810,096.00	\$ 47,810,096.00	\$ 48,333.00	\$ 47,858,429.00
NOTE: The following list reflects the most recent ALERTS issued to support the amounts reflected:					
ALERT	FUND SOURCE		DATE ISSUED		
1. ALERT 09-1	TITLE III/VII PLANNING LEVELS FOR SFY 2009		2/29/2008		
2. ALERT 09-2	SSBG/STATE ALLOCATIONS FOR SFY 2009		2/29/2008		
3. ALERT 09-3A	STATE ALLOCATION FOR SFY 2009		4/23/2008		
4. ALERT 09-4	STATE OMBUDSMAN ALLOCATION FOR SFY 2009		2/29/2008		
5. ALERT 09-5	STATE SPP ALLOCATION FOR SFY 2009		2/29/2008		
6. ALERT 09-6	NSIP ALLOCATION FOR SFY 2009		2/29/2008		
7. ALERT 09-7	SHIP & SENIOR PATROL ALLOCATIONS FOR SFY 2009		2/29/2008		
8. ALERT 09-8	STATE RESPITE ALLOCATION FOR SFY 2009		2/29/2008		
9. ALERT 09-11C	FOSTER GRANDPARENT ALLOCATION FOR SFY 2009		5/30/2008		